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382799

STATE OF ILLINOIS

POLLUTION CONTROL BOARD

309 WEST WASHINGTON STREET SUITE 300

JACOB D. DOMELLEZ, CHAIRMAN
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CHICAGO, ILLINOIS 60606

TELEPHONE
312-793-3620

December 18, 1973

Mr. Patrick O. Boyle
Legal Counsel
Olin Corporation
Energy Systems Operations
E. Alton, Illinois 62024

PCB73-395

OLIN CORPORATION

Mr. Samuel L. Xanders
Attorney at Law
108 N. Port Drive
Beltline Highway
Godfrey, Illinois 62035

v.

ENVIRONMENTAL PROTECTION AGENCY

Ms. Nancy Schaffenacker
Environmental Protection Agency
2200 Churchill Road
Springfield, Illinois 62706

Dear Sirs:

Enclosed please find certified copies of the Opinion and Order of the Board adopted December 13, 1973 for the above entitled matter.

Very truly yours,

Christan L. Moffett
Christan L. Moffett
Clerk of the Board

CLM:gn
enc.

cc: T. Immel
R. Cosby
L. Eaton
R. Goldberg
J. Anderson
L. Hudson
C. Clark

ILLINOIS POLLUTION CONTROL BOARD
December 13, 1973

OLIN CORPORATION,
a Virginia Corporation,

Petitioner,

vs.

ENVIRONMENTAL PROTECTION AGENCY,

Respondent.

PCB 73-395

Mr. Patrick O. Boyle, Attorney on behalf of Petitioner.
Mr. Dale R. Turner, Assistant Attorney General and
Mr. Paul Schmierbach, Attorney, appeared on behalf
of the Environmental Protection Agency.

OPINION AND ORDER OF THE BOARD (by Mr. Seaman):

On September 17, 1973, Petitioner, Olin Corporation, filed its Petition seeking a one-year variance from Rule 203(e) of this Board's Air Pollution Regulations (effective January 1, 1974).

At its facility in Williamson County, Illinois, Petitioner manufactures, inter alia, items which require propellant or pyrotechnic technology. Petitioner has disposed of the explosive wastes therefrom by open burning pursuant to the terms of a Variance originally granted by the Illinois Air Pollution Control Board (VR 67-50) and subsequently extended by the Illinois Pollution Control Board (PCB 72-517, PCB 72-357, PCB 71-371, PCB 71-60).

Petitioner has constructed a new and novel pollution control device for the disposal of its explosive and pyrotechnic wastes (hereinafter termed "experimental combustion device"). This experimental permit granted by the Agency on March 3, 1972 (OB 02 72 041, FIPS #199 055).

On February 9, 1973, Petitioner submitted an application to operate its new device (application # C-3-02-039, I.D. #199 055 AAR). The Agency denied said application on March 12, 1973. Petitioner, by the instant action, seeks variance to operate the experimental combustion device for a term of one year.

The pollution control equipment on the subject device consists of a wet venturi scrubber and cyclone, costing a total of \$14,000. The Agency calculates that the described pollution control equipment has a particulate removal efficiency of 99.7%.

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Petitioner estimates that the maximum amount of explosive scrap to be disposed of in any one week during 1974 will be as follows:

<u>Category</u>	<u>Maximum Amount per Week</u>
Ammonium Nitrate Propellant	300 lbs.
Double Base Propellant	40 lbs.
Single Base Propellant	20 lbs.
Pyrotechnic Flare Mix (high Magnesium content)	10,000 lbs.
Fuel Oil	Sufficient to immerse pyrotechnic mix as required for safety reasons

RDX	100 lbs.
-----	----------

Contaminated Packaging and Transfer Materials 100 lbs.

The Agency calculates emissions from the device to be 1.24 pounds per hour particulates and 1.61 pounds per hour carbon monoxide.

The subject device is situated in a remote area on a strip mine spoil land owned by Petitioner. Particulate concentrations in Petitioner's site area are 64 micrograms per cubic meter (maximum 24-hour average) and 32 micrograms per cubic meter (annual geometric mean). Both of these concentrations are well below primary and secondary national air quality standards. The 1975 particulate primary air quality standard is $75 \mu\text{g}/\text{m}^3$ annual geometric mean and $260 \mu\text{g}/\text{m}^3$ for a 24-hour average.

Petitioner states that it knows of no safe means to dispose of the explosive waste here involved other than by open burning or operation of the subject experimental device. The Agency concludes (Recommendation, p.3) that considerably more pollution would be emitted should Petitioner continue to open burn than if Petitioner employed its experimental combustion device.

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Petitioner has no compliance program since it alleges that the subject device represents an advance in the state of the art which is not presently recognized in the Illinois Emission Standards and Limitations for stationary sources. Petitioner's views have been presented to the Standards Section of the Division of Air Pollution Control at meetings held in Springfield, Illinois, on April 26, 1973 and September 6, 1973. Further, Petitioner intends to petition this Board for regulations covering the subject device.

The cost of constructing the subject device was approximately \$90,000 and it is estimated that the cost of operation, vis-à-vis the cost of open burning, would entail a ten-fold increase in labor alone (R.22). The Agency recommends that this variance be granted and emphasizes that Petitioner has had a good record of compliance with previous Board Orders.

We are disposed to grant the variance requested, subject to conditions. Petitioner's device appears to have advanced the state of the art and we will allow it an opportunity to prove its effectiveness. In any event, both the Agency and Petitioner currently agree that utilization of the subject device will greatly diminish the amount of air pollution being presently experienced from open burning of explosive wastes.

This Opinion constitutes the findings of fact and conclusions of law of the Board.

ORDER

IT IS THE ORDER of the Pollution Control Board that Petitioner, Olin Corporation, be granted a Variance from Rule 203(e) of the Air Pollution Regulations to operate the subject experimental combustion device for the disposal of its pyrotechnic wastes for a period of one year from the date of this Order, subject to the following conditions:

1. That the firing rate into Petitioner's experimental combustion device shall not exceed 500 pounds per hour of pyrotechnic wastes.
2. That Petitioner shall obtain from the Agency an Operating Permit for the experimental combustion device.

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3. That Petitioner shall not open burn any pyrotechnic wastes. In the event of a breakdown of the experimental combustion device, Petitioner shall store all pyrotechnic wastes until repairs are completed; however, if the time period necessary for repairs creates unreasonable safety hazards, then Petitioner may open burn such stored wastes after actual notice and approval by the Agency for each instance of open burning.

IT IS SO ORDERED.

I, Christan L. Moffett, Clerk of the Illinois Pollution Control Board, certify that the above Opinion and Order was adopted this 13th day of December, 1973 by a vote of 5 to 0.

Christan L. Moffett
OO

04480000175



STATE OF ILLINOIS
AIR POLLUTION CONTROL BOARD

616 STATE OFFICE BUILDING
SPRINGFIELD, ILLINOIS 62706

FOR INFORMATION TELEPHONE 525-7327
(AREA 217)

IL-15-12

TECHNICAL SECRETARY
CLARENCE W. KLASSEN
Chief Sanitary Engineer
Department of Public Health
Telephone 525-6580 (Area 217)

INSTALLATION PERMIT APPLICATION
FOR INCINERATORS

FOR OFFICE USE ONLY

I.D. No. [] [] [] [] [] []

Permit No. [] [] [] [] [] []

Date Examined [] [] [] [] [] [] By [] []

1. NAME OF OWNER: Olin Corporation ADDRESS OF OWNER: P.O. Drawer G, Marion, Ill. 62959
2. NAME AND TITLE OF PERSON PREPARING APPLICATION: R. D. Altekruse, Engineer SIGNATURE: [Signature]
3. NAME OF INSTALLATION: Pyrotechnic Incinerator ADDRESS OF INSTALLATION: (STREET, CITY, COUNTY, ZIP CODE) P.O. Drawer G, Marion, Ill. 62959

☐ INSIDE INCORPORATED LIMITS - CITY NAMED ☒ OUTSIDE LIMITS IN TOWNSHIP
4. DESCRIPTION OR SOURCE OF WASTE: Pyrotechnic Manufacture TYPE WASTE: Pyrotechnic BTU/LB (AS FIRED) 36100 DAILY AMOUNT: 1000 lb ESTIMATE: ☒ ACTUAL: ☐
BASIS OF ESTIMATE: (INDICATE NUMBER UNITS AND SIZE AREA SERVED, INCLUDE FOOD SERVICE AREAS)

5. MAKE OF INCINERATOR: Gillespie & Powers MODEL NO. N/A CLASS: N/A RATED CAPACITY: (LB./HR.) 3000 SPARK ARRESTER: None
6. OPERATED: 0 to 7 HRS/DAY STORAGE CAPACITY FOR WASTE: 1000 CU. FT. INSTALLATION: ☐ INDOORS ☒ OUTDOORS
7. TOTAL HEAT RELEASE (ENTIRE UNIT) 1660 BTU/HR./CU. FT. CHARGING METHOD: ☒ TOP ☐ SIDE ☐ END HAVE NFPA STANDARDS BEEN COMPLIED WITH: ☐ YES ☒ IN PROCESS
8. % EXCESS AIR: 1200% % AIR APPLIED AS OVERFIRE: 100%

PRIMARY COMBUSTION CHAMBER

9. VOLUME: 650 CU. FT. EFFECTIVE GRATE AREA: No Grate SQ. FT. HEARTH AREA: 12 SQ. FT. TOTAL HEAT RELEASE: 1660 BTU/HR./CU. FT.

SECONDARY COMBUSTION CHAMBER

10. VOL. AIR: None CU. FT. MAXIMUM GAS VELOCITY @ 1400 °F. IN FLAME PORT: FP5 RETENTION TIME OF GAS IN SETTLING CHAMBER: 100 SECS.

AUXILIARY BURNERS

11. TYPE AND FUEL: None NUMBER: 0 CAPACITY OF EACH: 0 BTU/HR. FLAME FAILURE CONTROL: None (TIMER, INERT, ETC.)

DAMPERS

12. ☒ HORIZONTAL SLIDING ☐ GUILLOTINE ☐ BUTTERFLY None ☐ PARALLEL DIA. INCHES: 0

DRAFT

13. ☐ NATURAL ☒ INDUCED ☐ FORCED 10,000 CFM AT 250 °F

OVERLAPS

14. BETWEEN THE TOP OF THE SIDEWALL AND BOTTOM OF CURTAIN WALL: N/A INCHES
BETWEEN THE BOTTOM OF CURTAIN WALL AND TOP PAVING IN FLUE CONNECTION: N/A INCHES

GAS CLEANING DEVICES

15. TYPE: Venturi MANUFACTURER: Mikropul CAPACITY: 8290 SCFH EFFICIENCY: 99.5%

STACK

16. HEIGHT ABOVE GRADE: 12 FT. MATERIALS OF CONSTRUCTION: 22 Ga. Stainless Steel INSIDE DIAMETER: 16" x 11-1/2"
HEIGHT NEARLY OBSTRUCTION: 10 ft. DISTANCE TO NEAREST OBSTRUCTION: 10 ft.

17. EXPECTED DATE OF COMPLETION: July, 1972

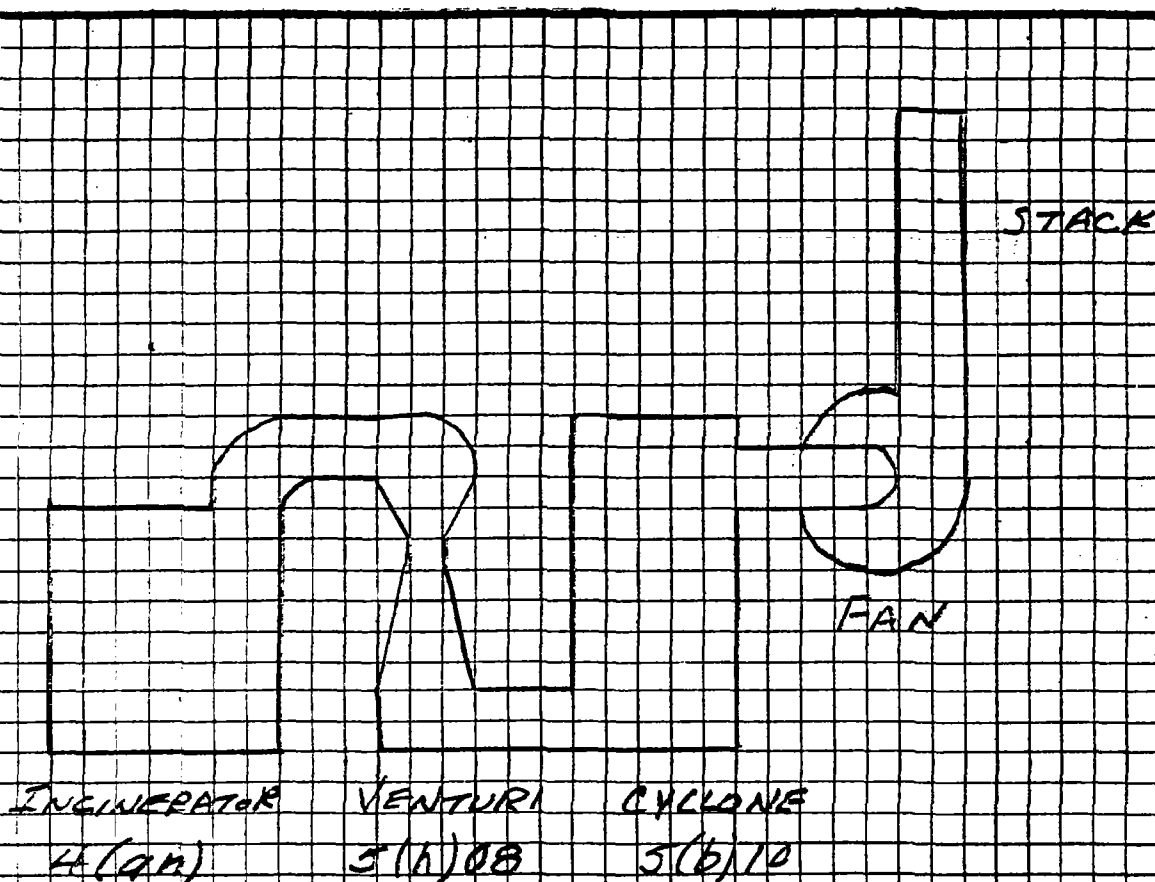
18. PROVIDE EXHAUST LINE DIMENSIONS, IN PLAN ELEVATION AND AS MANY SECTIONS AS ARE NECESSARY TO SHOW THE DESIGN, OPERATION AND LOCATION OF THE INCINERATOR INCLUDING STACK AND BREACHING AND AUXILIARY GAS CLEANING DEVICES, IF USED, AND FLAME PORT DIMENSIONS.

19. TOTAL INSTALLED COST, INCINERATOR: \$88,187 COST OF GAS CLEANING DEVICES: \$14,078

TAX RELIEF APPLIED FOR: ☒ YES ☐ NO DATE APPLIED FOR: In Process NO. OF TAX FORMS: To be determined

INSTRUCTIONS:

- (a) Flow diagram may be schematic or to scale. All equipment should be shown.
- (b) Show complete flow diagram of source operation from raw materials to finished product.
- (c) If more than one source operation is being constructed to make finished product, then show each separately and indicate where they merge.
- (d) Show number of pieces of equipment doing the same operation.
- (e) Indicate all points in process where all or other gases leave the process.
- (f) Use key on Schedules 4 and 5 or Form B to indicate Equipment, Material, or Stack.





STATE OF ILLINOIS
AIR POLLUTION CONTROL BOARD
616 STATE OFFICE BUILDING
SPRINGFIELD, ILLINOIS 62706
FOR INFORMATION TELEPHONE 525-7327
(AREA 217)

TECHNICAL SECRETARY
CLARENCE W. KLASSEN
Chief Sanitary Engineer
Department of Public Health
Telephone 525-6580 (Area 217)

INSTALLATION PERMIT APPLICATION
FOR SOURCE OPERATIONS AND GAS
CLEANING DEVICES

FOR OFFICE USE ONLY

I. D. No.

Permit No.

Date Examined By

Page 1

1. Name of Owner: Olin Corporation	Address of Owner: P.O. Drawer G, Marion, Illinois 62959
2. Name and title of person preparing application: R. D. Altekruse, Engineer	Signature: <i>R. D. Altekruse</i>
3. Name of Installation: Pyrotechnic Incinerator	Address of Installation: (street, city, county, zip code) P.O. Drawer G, Marion, Ill. 62959

☐ Inside incorporated limits - City named

☒ Outside limits in

Township

24. SOURCE OPERATION SCHEDULE (COMPLETE MODIFIED FORM B FOR EACH)

NO. OF UNITS	SOURCE OPERATION	NO. OF UNITS	SOURCE OPERATION	NO. OF UNITS	SOURCE OPERATION	NO. OF UNITS	SOURCE OPERATION
(a)	Spray Booth	(k)	Sandblast	(u)	Dryer	(ae)	
(b)	Silk Screen Process	(l)	Rotoblast	(v)	Heat Treating	(af)	
(c)	Flowcoater	(m)	Shot Blast	(w)	Other Oven	(ag)	
(d)	Paint Dip	(n)	Mixers	(x)	Crucible	(ah)	
(e)	Other Dip	(o)	Classification	(y)	Cupola	(ai)	
(f)	Conveyors	(p)	Grinding	(z)	Electric Arc	(aj)	
(g)	Tanks	(q)	Disintegration	(aa)	Induction	(ak)	
(h)	Printing	(r)	Baking Oven	(ab)	Reverberatory	(al)	
(i)	Storage Rooms	(s)	Curing Oven	(ac)	Rotary	(am)	
(j)	Bulk Loading or Unloading	(t)	Kiln	(ad)	Shake Out Areas	(an) 1	OTHER Incinerator

5. GAS CLEANING DEVICES SCHEDULE: (COMPLETE PAGE 3 FOR THESE DEVICES)

NO. OF UNITS	CONTROL DEVICE	NO. OF UNITS	CONTROL DEVICE	NO. OF UNITS	CONTROL DEVICE	NO. OF UNITS	CONTROL DEVICE
(a)	Settling Chamber (09)	(e)	Spray Chamber (05)	(i)	Absorber (01)	(m)	Fabric Filter (13)
(b) 1	Cyclone (10)	(f)	Scrubber (06)	(j)	Adsorber (02)	(n)	Electrostatic Precipitator (14)
(c)	Multiple Cyclone (11)	(g)	Packed Tower (07)	(k)	Catalytic burner (03)	(o)	Masking (15)
(d)	Rotoclone (12)	(h) 1	Venturi Scrubber (08)	(l)	Afterburner (04)	(p)	Other - Specify (16)

6. EQUIPMENT COST

Total Installed Cost Equipment: \$88,187	Cost of Gas Cleaning Equipment: \$14,078	% of Total Equipment Cost: 100%
Tax Relief Applied For: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date Applied For: In Process	No. of tax Form: To be Determined

ILLINOIS AIR POLLUTION
CONTROL BOARD

cc 80 FORM B - SOURCE OPERATION DATA

cc 79 = CARD IDENTIFICATION - PUNCH: 9

I.D. NO

cc 1 - 6

SOURCE OPERATION NUMBER

A. DESCRIBE SOURCE OPERATION AND TYPE OF PROCESS EQUIPMENT.

Pyrotechnic Waste Incinerator (See Attached Form)

OFFICE USE ONLY	CARD COLS.			
	10	11	12	13
	BEC NUMBER			
BEC FACTOR	14	15	16	17

Card Cols.		
7	8	9
6	0	

B. RAW MATERIALS USED IN SOURCE OPERATION FOR NORMAL THROUGHPUT CAPACITY. NORMAL OPERATION IS

% OF MAXIMUM CAPACITY.

MATERIAL	STARTING WEIGHT	MATERIAL	STARTING WEIGHT
1. Pyrotechnic Waste	5 lb/min.	5.	
2.		6.	
3.		7.	
4.		8.	

C. EMISSION: Check types of discharge that can possibly be emitted from process or equipment directly to atmosphere through stacks or ducts.

SOURCE OPERATION DISCHARGES - cc 24

cc 18 - 1 ☒ Solid, particulate matter

cc 20 - 3 ☐ Gases, vapors or fumes

cc 22 - 5 ☐ Mists or Aerosols

1 ☐ From Stack

2 ☐ At Ground Level

cc 19 - 2 ☐ Steam

cc 21 - 4 ☐ Odors of any type

cc 23 - 6 ☐ None

25	26	27	28
		1	2

3 ☒ From Vents or other Opening
(FT.) STACK HEIGHT ABOVE GRADE

D. PROCESS WEIGHT RATE (lbs./hr.)

E. OPERATION TIME hrs/day

cc-	29	30	31	32	33	34	35
				3	0	0	

cc-	36	37	38
		7	

F. INLET GAS RATE (SCFM)

COLLECTION EQUIPMENT

INLET LOADING

G.	39	40	41	42	43	44
GRAINS/SCF		3	8		0	8

I. PRIMARY COLLECTOR: (See Code Below)

K. (%)	
Card Cols.	
45	46
9	9
5	

L. OPERATION IS

☐ Continuous

☒ Batch

Cycle per batch 10 min.

CD. COLS.

CARD COLS

48	49	50
	1	0

51	52	53	54	55	56	57
		8	2	9	0	

H.	58	59	60	61
lbs/1000 lbs GAS				

J. SECONDARY COLLECTOR: (See Code Below)

62	63
1	0

64	65	66
9	9	5

M. MEASURED -

ESTIMATED

EMISSIONS TO ATMOSPHERE (lbs/hr)

67	68	69	70	71
			1	4

N.

ALLOWABLE EMISSIONS TO ATMOSPHERE (lbs/hr.)

72	73	74	75	76
			3	6

INSTRUCTIONS: (NOTE - Dotted lines indicate position of decimal point. Use additional sheets for miscellaneous comments.)

Item A. Describe your source operation and type of process equipment.

B. List all starting raw materials charged, including solid fuels. Specify lbs/hr. For batch operations specify lbs.

C. Check appropriate boxes and enter discharge information.

D. Indicate the total weight rate of all materials introduced into the source operation. Solid fuels charged will be considered as part of the process weight but liquid and gaseous fuels and combustion air will not. Include recycled material.

E. Enter normal operational hours per day for this source operation.

F. Enter rate of gas inlet to collection equipment in standard cubic feet per minute.

G&H. Enter particulate concentration of gas inlet to collection equipment in either column G or H.

I&J. List collection equipment serving the process, code as follows:

01-Absorber 03-Catalytic burner 05-Spray Chamber 07-Packed Tower 09-Settling Chamber 11-Multiclone 13-Baghouse 15-Masking
02-Adsorber 04-Afterburner 06-Scrubber 08-Venturi Scrubber 10-Cyclone 12-Rotoclone 14-Precipitator 16-Other

K. Enter estimate of collector efficiency (%).

L. Check type of operation. For batch operation, enter hours per batch cycle.

M. Enter estimate of particulates emitted to the atmosphere from this operation in lbs/hr. Circle Measured or Estimated.

N. Enter allowable emission from Table I, Chapter III of the Regulations.



STATE OF ILLINOIS
AIR POLLUTION CONTROL BOARD
616 STATE OFFICE BUILDING
SPRINGFIELD, ILLINOIS 62706
FOR INFORMATION TELEPHONE 525-7327
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Chief Sanitary Engineer
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Telephone 525-6580 (Area 217)

INSTALLATION PERMIT APPLICATION
FOR SOURCE OPERATIONS AND GAS
CLEANING DEVICES

Page 3

a. Complete the sections indicated: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11		b. Installation Address: P.O. Drawer G, Marion, Ill. 62959	
1	c. Owner Name: Olin Corporation	d. Owner Address: P.O. Drawer G, Marion, Ill. 62959	
	e. Prepared by: <i>R. D. Altekruse</i>	f. Prepared by: (Name and title) R. D. Altekruse, Engineer	
2	a. EQUIPMENT DATA	b. Type of Equipment Incinerator	c. Make and Model Special Design
	d. Dimensions (LxWxH) 10 x 10 x 12	e. Number of units, capacity 300 lb./hr.	f. Auxiliary Equipment Gas Scrubber
3	a. SETTLING CHAMBER	b. Retention time (sec.)	c. Dimensions (LxWxH)
	d. Settling Velocity (FPS)	e. Number of units on construction	f. Length of settling path
4	a. BURNER DATA	b. Type of Burner, Fuel	c. Make and Model
	d. Rating	e. Number of units, ignition	f. CFM Exhausted (Temperature)
5	a. STACKS, VENTS AND EXHAUST OPENING	b. Type of Vent Stack	c. Dimensions (LxWxH) 16" x 11-1/2"x12"
	d. Dampers	e. Number of vents, construction	f. CFM Exhausted (Temperature) <input type="checkbox"/> o/s <input type="checkbox"/> i/s 8290
6	a. LIQUID FLOW	b. Flow (Spray, Bubbler, etc.) Venturi Throat	c. Contact Area
	d. Contact Time (sec.)	e. Composition of Solution Water	f. Flow Rate (GPH) 4800
7	a. FAN DATA	b. Type of Fan (Designate Blade) H-20	c. Make and Model Buffalo 805
	d. Motor Data 75 HP	e. Number of fans, construction	f. CFM Exhausted (Temp. & S.P.) <input type="checkbox"/> o/s <input type="checkbox"/> i/s 8290
8	a. CYCLONE DATA	b. Type of Cyclone <input type="checkbox"/> multiclone <input checked="" type="checkbox"/> common <input type="checkbox"/> split duct	c. Make and Model Mikropul
	d. Inlet Area 2.8 Sq. Ft.	e. Number of units, construction 1	f. Body Diameter 58 inch
9	a. WASTE DATA	b. Description of waste Pyrotechnic Waste	c. Amount Collected 1000 Pounds/Day
	d. Particle Size (Average) .27 Microns	e. Types of Pollutants <input type="checkbox"/> Odor <input checked="" type="checkbox"/> Particulate <input type="checkbox"/> Aerosol <input type="checkbox"/> Gas	f. Body Height 114 inch
10	a.	b.	c.
	d. Captive Pond	e.	f.
11	a.	b.	c.
	d.	e.	f.



GILLESPIE & POWERS INC.

4829 EASTON AVENUE

ST. LOUIS, MISSOURI 63113

JEFFERSON 3-4110

/ engineering & construction

Olin Corporation
Marion, Illinois

PYROTECHNIC SCRAP WASTE INCINERATOR

MAJOR EQUIPMENT SUMMARY

1. Building

One 12'x18'x10' Butler M-36 building. Building to be galvanized, unpainted, with trim. Accessories shall include one 9'x9' galvanized overhead door, two window sashes, and two man doors. The building shall utilize a galvanized steel panel of sufficient strength and configuration to serve as both structural support and exterior cover without need for an independent structural framing system. The panel thickness shall be not less than that recommended by the Metal Buildings Manufacturer's Association, and shall be capable of spanning 12' in simple span with a design loading of 30 PSF plus panel dead loading without exceeding a deflection-to-span ratio of 1 to 180.

2. Incinerator

Shall be a steel-cased refractory-lined unit, having an inside diameter of 10' and an overall height of 12'. This unit shall serve as the ignition chamber for the introduction

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of a pyrotechnic waste material. A hydraulically operated charging door shall be located on top of the structure to permit the discharging of the packets onto an incandescent coke bed at the bottom of the ignition chamber. Air ports of sufficient number and size shall be uniformly spaced around the perimeter of this unit to provide an equivalent air flow of approximately 20,000 SCFM. The incinerator shall be connected to the scrubber by way of stainless steel duct work.

3. Scrubber

The scrubber shall be a Model 4100 Mikro/Airetron venturi scrubber with cyclonic slurry/air separator with the following features:

Inlet - 1'10" square

Exhaust - 1'10" square (2'2" dia. optional)

Venturi height - 7'9"

Separator size - 4'10" dia. x 9'6½" O.A. height

Construction - 12-gauge 316 stainless steel

Access - 18" dia. manhole with hinged quick opening hatch

Pressure taps - three ½" NPT (one located at venturi inlet, one at separator inlet, and one at separator exit)

Special features - manually adjustable venturi throat and separator inlet to permit matching of unit to the air flow

PRESSURE DROP - 34" W.G.

4. Fan

The fan shall be a Buffalo-Forge, Size #805, Type H-20, heavy-duty centrifugal fan, single inlet, arrangement #8 for direct drive, complete with motor base, flanged inlet and

0448000137

outlet, split and gasketed housing section for wheel and shaft removal, access door, shaft seal, housing drain, 75-horsepower, 1800-RPM, TEFC General Electric motor, coupled, all factory mounted.

5. Building Unit Heater

This heater shall be a Heil #EF-33-LE-R, 32,800 BTU per hour, 9.6-KW, 240-volt, 60-cycle, $\frac{1}{4}$ -horsepower, 4-speed electric heater.

6. Hydraulic Cylinder

Shall be an Ortman-Miller Model #2TH, Style J, 2 $\frac{1}{2}$ " bore by 34" stroke, 1-3/8" diameter rod, with rod clevis and pin.

7. Hydraulic Motor

To be Char-Lynn #AK-7.

8. Hydraulic Package

This shall include a 4-gallon-per-minute, 2-horsepower pump and motor combination, with 5-gallon reservoir. Also included shall be two solenoid-operated directional control valves, speed-control valves, adjustable relief valves, return-line filter, and necessary hardware. Unit shall be John S. Barnes Series 3218, Unit #25.

9. Water Circulation Pump

Shall be Wemco 3x1 $\frac{1}{2}$ x6 B torque flow polypropelene chemical pump with 3-horsepower TEFC motor.

10. Lift Station Sump Pump

This shall be Barnes Model SS-30 sump pump, complete with level control, gate and check valve.

11. Pressure Switches

The pressure switches shall be Meletron 2200 Series.

12. Timers

These are to be Eagle Signal Division's Cycl-Flex timers HP-53.

13. Incandescent Charcoal Sensor

To be Barber-Colman Model 1470 flameotrol combustion safeguard master.

14. Flash Detector

To be Barber-Colman Model 1480 flameotrol combustion safeguard slave.

15. Flame Eyes

The flame eyes for the detection of incandescent coals and flash are to be Barber-Colman Model 1291, complete with heat insulating flange assembly.



STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF AIR POLLUTION CONTROL
2200 CHURCHILL ROAD
SPRINGFIELD, ILLINOIS 62706

RICHARD B. OGILVIE, GOVERNOR
WILLIAM L. BLASER, DIRECTOR

CONSTRUCTION PERMIT APPLICATION FOR EMISSION SOURCE		FOR OFFICIAL USE ONLY	
		I.D. NO.	
		PERMIT NO.	
		DATE	
1a. NAME OF OWNER: Olin Corporation		1b. NAME OF OPERATOR: Same	
2a. TELEPHONE NUMBER OF OWNER: (618) 985-3721		2b. TELEPHONE NUMBER OF OPERATOR:	
3a. STREET ADDRESS OF OWNER: P.O. Drawer G		3b. STREET ADDRESS OF OPERATOR:	
4a. CITY OF OWNER: Marion,		4b. CITY OF OPERATOR:	
5a. STATE OF OWNER: Ill.	5b. ZIP CODE: 62959	6a. STATE OF OPERATOR:	6b. ZIP CODE:
7. NAME OF CORPORATE DIVISION OR PLANT (IF DIFFERENT FROM OWNER):			
8. TELEPHONE NUMBER OF DIV. OR PLANT:		9. LOCATED WITHIN CITY LIMITS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
10. STREET ADDRESS OF EMISSION SOURCE:		11. CITY:	
12. COUNTY:		13. ZIP CODE:	

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A PERMIT TO CONSTRUCT OR MODIFY THE EQUIPMENT DESCRIBED HEREIN AND CERTIFIES THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT, AND FURTHER CERTIFIES THAT ALL PREVIOUSLY SUBMITTED INFORMATION REFERENCED IN THIS APPLICATION REMAINS TRUE, CORRECT AND CURRENT.

OWNER (if individual)

Signature

Date

--	--	--	--	--	--	--	--	--	--

Your Identification Number
(Optional)

OPERATOR (if individual)

Signature

Date

OWNER (if corporation or partnership)

Olin Corporation

February 7, 1973

Exact corporate or partnership name Date

By

Signature

Title

Robert C. Menken, Vice President
Energy Systems Operations

OPERATOR (if corporation or partnership)

By

Exact corporate or partnership name

Date

Signature

Title

IF AN OWNER OR OPERATOR IS A CORPORATION, IT MUST HAVE ON FILE WITH THE AGENCY, A CERTIFIED COPY OF A RESOLUTION OF ITS BOARD OF DIRECTORS AUTHORIZING THE INDIVIDUALS SIGNING THE APPLICATION TO EXECUTE THIS CONSTRUCTION PERMIT APPLICATION AND TO CAUSE OR ALLOW THE CONSTRUCTION, MODIFICATION AND OPERATION OF THE EQUIPMENT TO BE COVERED BY THE PERMIT.

THIS PERMIT APPLICATION CONSISTS OF APPLICATION FORMS AND OTHER EXHIBITS LISTED BY TITLE AND NUMBER OF PAGES BELOW.

APC-63 3 pages
Addendum 2 pages
Destructor-Retort Sketch SK-APC-63-1, 1 page
Flow Diagram Sketch SK-APC-63-2, 1 page

GENERAL INFORMATION

NOTE: APPLICANT MUST SUBMIT TWO COPIES (THREE IF LOCATED IN COOK COUNTY) OF EACH OF THE FOLLOWING:

1. CONSTRUCTION PERMIT APPLICATION FORM (SEPARATE APPLICATION FORM FOR EACH EMISSION SOURCE NOT COVERED BY AN ATTACHED ADDENDUM).
2. DIMENSIONED DRAWINGS, PLAN, ELEVATION (SECTIONED WHERE NECESSARY AND WHERE APPLICABLE), PLOT PLAN AND MAP SHOWING DISTANCES TO NEAREST BOUNDARY OF THE PROPERTY ON WHICH THE EMISSION SOURCE IS LOCATED AND THE DISTANCES TO NEAREST RESIDENCES, LODGINGS, NURSING HOMES, HOSPITALS, SCHOOLS AND COMMERCIAL AND MANUFACTURING ESTABLISHMENTS.
3. FLOW DIAGRAM AS SPECIFIED IN THE INSTRUCTION SHEET.

<p>14. NAME OF PROCESS: <u>Destructor-Retort</u></p>	<p>15. NAME OF EMISSION SOURCE EQUIPMENT: <u>Retort</u></p>	
<p>16. EMISSION SOURCE EQUIPMENT MANUFACTURER: <u>Olin Corporation</u></p>	<p>17. MODEL NUMBER: <u>N/A</u></p>	<p>18. SERIAL NUMBER: <u>N/A</u></p>
<p>19. NUMBER OF IDENTICAL EMISSION SOURCES: <u>1</u></p>	<p>20. TYPE PROCESS: <input type="checkbox"/> CONTINUOUS <input checked="" type="checkbox"/> BATCH</p>	
<p>21. PROCESS WEIGHT RATE: <u>See Addendum</u> LB/HR</p>	<p>22. BATCH RATE: <u>See Addendum</u> BATCH/HR</p>	
<p>23. COMPOSITION OF RAW MATERIALS USED IN THE PROCESS AND PERCENT OF EACH BY WEIGHT (COMMON NAME SHOULD BE GIVEN IF CHEMICAL NAME IS UNKNOWN):</p>		

See Addendum

<p>24. NAME OF PRODUCTS MANUFACTURED:</p> <p>a. <u>20mm Ammunition</u></p> <p>d. _____</p> <p>g. _____</p>	<p>MAXIMUM PRODUCTION RATE FOR EACH PRODUCT:</p> <p>b. <u>1500 rounds</u> LB/HR</p> <p>e. _____ LB/HR</p> <p>h. _____ LB/HR</p>	<p>ESTIMATED AVERAGE PRODUCTION RATE OF EACH PRODUCT:</p> <p>c. <u>1000 rounds</u> LB/HR</p> <p>f. _____ LB/HR</p> <p>i. _____ LB/HR</p>
<p>25. WASTE MATERIALS FROM MANUFACTURING PROCESS:</p> <p>a. <u>Fuzes</u></p> <p>d. <u>Primers</u></p> <p>g. <u>Loaded Projectiles</u></p>	<p>MAXIMUM AMOUNT OF WASTE MATERIALS PRODUCED.</p> <p>b. <u>.3</u> LB/HR</p> <p>e. <u>.03</u> LB/HR</p> <p>h. <u>.8</u> LB/HR</p>	<p>ESTIMATED AVERAGE AMOUNT OF WASTE MATERIALS PRODUCED.</p> <p>c. <u>.2</u> LB/HR</p> <p>f. <u>.01</u> LB/HR</p> <p>i. <u>.4</u> LB/HR</p>
<p>26. AVERAGE OPERATION TIME OF EMISSION SOURCE: <u>2</u> HRS/DAY <u>5</u> DAYS/WK <u>52</u> WKS/YR</p>		<p>27. PERCENT OF ANNUAL THROUGHPUT: DEC/FEB <u>25</u> % MAR/MAY <u>25</u> % JUNE/AUG <u>25</u> % SEP/NOV <u>25</u> %</p>

I.D. NO.

FOR OFFICIAL USE ONLY

PERMIT APPLICATION NO.

S

EXHAUST GAS ANALYSIS
(FROM EMISSION SOURCE TO CONTROL EQUIPMENT)

NOTE: IF THE EMISSION SOURCE WHICH IS THE SUBJECT OF THIS CONSTRUCTION PERMIT APPLICATION IS SERVED BY MORE THAN ONE EXHAUST STACK OR VENT, THE APPLICANT SHALL COMPLETE SEPARATE SHEETS FOR EACH SUCH STACK OR VENT.

CONTAMINANT	CONCENTRATION		EMISSION RATE		METHOD OF MEASURE AND ANALYSIS	METHOD OF MONITORING
28. CARBON MONOXIDE	a.	PPM	b.	LB/HR	c.	d.
29. CARBON DIOXIDE	a.	PPM	b.	LB/HR	c.	d.
30. CHLORINE	a.	PPM	b.	LB/HR	c.	d.
31. HYDROCARBONS AS CH ₄	a.	PPM	b.	LB/HR	c.	d.
32. HYDROGEN CHLORIDE	a.	PPM	b.	LB/HR	c.	d.
33. HYDROGEN SULFIDE	a.	PPM	b.	LB/HR	c.	d.
34. NITROGEN	a.	PPM	b.	LB/HR	c.	d.
35. NITROGEN OXIDES AS NO ₂	a.	PPM	b.	LB/HR	c.	d.
36. SULFUR DIOXIDE	a.	PPM	b.	LB/HR	c.	d.
37. OTHER (SPECIFY)	a.	PPM	b.	LB/HR	c.	d.
38. PARTICULATE MATTER	a.	GRAIN SCF	b.	LB/HR	c.	d.

SEE ADDENDUM

39. PARTICULATE MATTER COMPOSITION EXPRESSED AS PERCENT BY WEIGHT OF EACH COMPONENT (COMMON NAME SHALL BE GIVEN IF CHEMICAL NAME IS UNKNOWN):

NOTE: THIS SECTION TO BE COMPLETED ONLY IF EMISSIONS ARE EXHAUSTED DIRECTLY TO THE ATMOSPHERE WITHOUT ANY CONTROL EQUIPMENT:

40. HOW EMISSIONS ARE EXHAUSTED: <input type="checkbox"/> STACK <input type="checkbox"/> VENT	41. GAS EXIT VELOCITY: FPS	42. GAS EXIT TEMPERATURE: °F
43. DRAFT CONTROLS: <input type="checkbox"/> MANUAL <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> BAROMETRIC <input type="checkbox"/> OTHER (SPECIFY)		
44. DISTANCE OF THE STACK OR VENT FROM THE NEAREST PLANT BOUNDARY OF THE APPLICANT: FT.	45. HEIGHT OF STACK OR VENT ABOVE GRADE: FT.	
46. HEIGHT OF STACK OR VENT ABOVE ROOF: FT.	47. HEIGHT OF TALLEST BUILDING WITHIN 150 FEET: FT.	
48. YOUR DESIGNATION OF STACK:	49. AREA OF STACK OR VENT AT EXIT: FT ²	

50. IF OTHER EMISSION SOURCES OR AIR POLLUTION CONTROL EQUIPMENT ARE EXHAUSTED THROUGH THE STACK OR VENT SERVING THE EQUIPMENT COVERED BY THIS APPLICATION, THE APPLICANT SHALL DEFINE THE EMISSIONS FROM SUCH OTHER EQUIPMENT AND ATTACH SUCH INFORMATION TO THIS APPLICATION AS EXHIBIT G.

TOTAL NUMBER OF PAGES IN EXHIBIT G: _____

Being determined for Experimental Pyrotechnic
Destructor (EPA Ref OB 02 72 041, FIPS #199,05

51. THE APPLICANT SHALL SUBMIT AN ESTIMATE OF THE MAXIMUM ONE-HOUR AMOUNTS OF PARTICULATE MATTER, SULFUR DIOXIDE, CARBON MONOXIDE, OXIDES OF NITROGEN, AND HYDROCARBONS (AS METHANE) EMITTED FROM ALL SOURCES LOCATED ON THE PLANT OR PREMISES, INCLUDING THE EMISSIONS ESTIMATED FROM THE EQUIPMENT COVERED BY THIS APPLICATION, AND THE AREA (IN ACRES) OF THE PLANT OR PREMISES OF THE APPLICANT. 100 acres

MATERIAL	ONE-HOUR MAX. AMOUNTS	MATERIAL	ONE-HOUR MAX. AMOUNTS	MATERIAL	ONE-HOUR MAX. AMOUNTS
PARTICULATE MATTER	1.2 LB	SULFUR DIOXIDE	Nil LB	NITROGEN OXIDES AS NO ₂	Nil LB
HYDROCARBONS AS CH ₄	Nil LB	CARBON MONOXIDE	16 LB		

ADDENDUM TO FORM APC-63

Addition of a new product line at the Marion, Illinois, plant of the Olin Corporation will result in the necessity for disposition of waste components containing high explosives. The only known safe method for disposition of these materials is to subject them to sufficient heat to cause burning and/or detonation of the explosive ingredients. This cannot be accomplished in the Experimental Pyrotechnic and Propellant Destructor which Olin has been testing (EPA reference OB 02 72 041, FIPS #199055) because the system would be severely damaged by the frequent detonations. The normal method of disposition is to charge the components slowly into a heavy steel Destructor Retort which is heated by means of a standard oil burner and to allow the heavy steel walls to contain shrapnel from the detonations. This Construction Permit Application covers installation of such a Destructor-Retort at the Marion Plant.

Construction of the Destructor-Retort is shown in attached sketch SK-APC-63-1. It is recognized that this operation would be considered open burning if the combustion products were allowed to escape to the atmosphere untreated. Olin, therefore, proposes that the Destructor-Retort effluent be ducted to the scrubbing system now existent as part of the Pyrotechnic Destructor (EPA reference OB 02 72 041, FIPS #199 055). The flow diagram for the system is shown in attached sketch SK-APC-63-2.

It is proposed that the Destructor-Retort be installed immediately adjacent to the existing scrubber. Plot plan maps of this remote abandoned strip mine area were submitted as part of the Permit Application for the Pyrotechnic Destructor mentioned above.

The oil burner which supplies the heat for the system is of the air atomizing type and burns 7 gallons per hour of No. 2 fuel oil.

Three types of waste will be charged to the unit. These are:

A. Fuses loaded with

1. Detonator

HMX Explosive	98%	
Graphite	1%	6 grams
Calcium Resinate	1%	

and 2. Primer loaded with

Lead Styphnate Explosive	14.4%	
Lead Azide Explosive	63.2%	2.2 grams
RDX Explosive	22.4%	

B. Primers loaded with

Carbon Black	.75%	
Barium Nitrate	44.25%	
Calcium Silicide	13.00%	
Gum Arabic	1.00%	0.194 grams
Lead Styphnate Explosive	40.00%	
Trinitrorecorsinol	1.00%	

and C. Projectiles loaded with

RDx Explosive	66%	
Aluminum Powder	33%	180 grains
Graphite	1%	
Calcium Stearate	<0.25%	

Process charge rates of these materials would be a maximum of

A. Fuses - 8 lb/hr.

B. Primers - 2 lb/hr.

C. Projectiles - 10 lb/hr.

No stack tests have been performed on any of these operations because of the obvious hazards involved. However, primer mixes of similar chemical compositions have been burned and stack tests taken. Results of these tests were as follows:

Charge Rate	6 lb/hr.
Particulate emissions adjusted for 50% excess air	0.28 grains/cu.ft.
NO _x (as NO ₂)	1.1 ppm
SO ₂	158 ppm



STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF AIR POLLUTION CONTROL
2200 CHURCHILL ROAD
SPRINGFIELD, ILLINOIS 62706

RICHARD B. OGILVIE, GOVERNOR
WILLIAM L. BLASER, DIRECTOR

CONSTRUCTION PERMIT APPLICATION FOR EMISSION SOURCE		FOR OFFICIAL USE ONLY	
		I.D. NO.	1190055/AAE
		PERMIT NO.	C2020319
		DATE	Rec'd 22 Jan 74
1a. NAME OF OWNER: Olin Corporation		1b. NAME OF OPERATOR:	
2a. TELEPHONE NUMBER OF OWNER: 618/985-3721		2b. TELEPHONE NUMBER OF OPERATOR:	
3a. STREET ADDRESS OF OWNER: P.O. Drawer G		3b. STREET ADDRESS OF OPERATOR:	
4a. CITY OF OWNER: Marion,		4b. CITY OF OPERATOR:	
5a. STATE OF OWNER: Illinois	5b. ZIP CODE: 62959	6a. STATE OF OPERATOR:	6b. ZIP CODE:
7. NAME OF CORPORATE DIVISION OR PLANT (IF DIFFERENT FROM OWNER):			
8. TELEPHONE NUMBER OF DIV. OR PLANT:		9. LOCATED WITHIN CITY LIMITS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
10. STREET ADDRESS OF EMISSION SOURCE:		11. CITY:	
12. COUNTY:		13. ZIP CODE:	

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A PERMIT TO CONSTRUCT OR MODIFY THE EQUIPMENT DESCRIBED HEREIN AND CERTIFIES THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT, AND FURTHER CERTIFIES THAT ALL PREVIOUSLY SUBMITTED INFORMATION REFERENCED IN THIS APPLICATION REMAINS TRUE, CORRECT AND CURRENT.

OWNER (if individual)

OWNER (if corporation or partnership)

Signature

Date

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Your Identification Number
(Optional)

OPERATOR (if individual)

Signature

Date

Olin Corporation

February 7, 1974

Exact corporate or partnership name

Date

By

Signature
Robert C. Menken, Vice President
Energy Systems Operations

OPERATOR (if corporation or partnership)

Exact corporate or partnership name

Date

Signature

Title

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THIS PERMIT APPLICATION CONSISTS OF APPLICATION FORMS AND OTHER EXHIBITS LISTED BY TITLE AND NUMBER OF PAGES BELOW.

APC-63 - 3 pages
APC-61 - 6 pages
APC-104 - 1 page
Addendum - 1 page
Test Report - 16 pages

I.D. NO.

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PERMIT APPLICATION NO.

S

GENERAL INFORMATION

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2. DIMENSIONED DRAWINGS, PLAN, ELEVATION (SECTIONED WHERE NECESSARY AND WHERE APPLICABLE), PLOT PLAN AND MAP SHOWING DISTANCES TO NEAREST BOUNDARY OF THE PROPERTY ON WHICH THE EMISSION SOURCE IS LOCATED AND THE DISTANCES TO NEAREST RESIDENCES, LODGINGS, NURSING HOMES, HOSPITALS, SCHOOLS AND COMMERCIAL AND MANUFACTURING ESTABLISHMENTS.
3. FLOW DIAGRAM AS SPECIFIED IN THE INSTRUCTION SHEET.

14. NAME OF PROCESS: Pyrotechnic Destruction		15. NAME OF EMISSION SOURCE EQUIPMENT: Pyrotechnic Destructor	
16. EMISSION SOURCE EQUIPMENT MANUFACTURER: Gillespie & Powers, Inc.		17. MODEL NUMBER: N/A	18. SERIAL NUMBER: N/A
19. NUMBER OF IDENTICAL EMISSION SOURCES: 1		20. TYPE PROCESS: <input type="checkbox"/> CONTINUOUS <input checked="" type="checkbox"/> BATCH	
21. PROCESS WEIGHT RATE: 500 (max) LB/HR		22. BATCH RATE: BATCH/HR (max.) 500 LB/HR	
23. COMPOSITION OF RAW MATERIALS USED IN THE PROCESS AND PERCENT OF EACH BY WEIGHT (COMMON NAME SHOULD BE GIVEN IF CHEMICAL NAME IS UNKNOWN):			
a. Pyrotechnic Waste (see below) 75/80% Charcoal 20/25% b. Solid Propellant Waste(see below) 75/80% Charcoal 20/25%			
24. NAME OF PRODUCTS MANUFACTURED:		MAXIMUM PRODUCTION RATE FOR EACH PRODUCT:	ESTIMATED AVERAGE PRODUCTION RATE OF EACH PRODUCT:
a. N/A		b. N/A LB/HR	c. N/A LB/HR
d. _____		e. _____ LB/HR	f. _____ LB/HR
g. _____		h. _____ LB/HR	i. _____ LB/HR
25. WASTE MATERIALS FROM MANUFACTURING PROCESS:		MAXIMUM AMOUNT OF WASTE MATERIALS PRODUCED.	ESTIMATED AVERAGE AMOUNT OF WASTE MATERIALS PRODUCED.
a. 15% Sodium Oxide		b. 400 LB/HR	c. 300 LB/HR
a. 85% Magnesium Oxide		e. _____ LB/HR	f. _____ LB/HR
d. _____		h. _____ LB/HR	i. _____ LB/HR
g. _____			
26. AVERAGE OPERATION TIME OF EMISSION SOURCE: 6 HRS/DAY 2 DAYS/WK 52 WKS/YR		27. PERCENT OF ANNUAL THROUGHPUT: DEC/FEB 25% MAR/MAY 25% JUNE/AUG 25% SEP/NOV 25%	

23 (Continued)

- a. Pyrotechnic Waste
 - 58% Magnesium Powder
 - 37% Sodium Nitrate
 - 5% Organic Binder
 - plus sufficient #2 fuel oil to wet waste for safety reasons
- b. Solid Propellant Waste
 - 75% Ammonium Nitrate
 - 15% Synthetic Rubber
 - 10% Various Organic Chemicals



STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF AIR POLLUTION CONTROL
2200 CHURCHILL ROAD
SPRINGFIELD, ILLINOIS 62706

RICHARD B. OGILVIE, GOVERNOR

WILLIAM L. BLASER, DIRECTOR

CONSTRUCTION PERMIT APPLICATION
FOR
AIR POLLUTION CONTROL EQUIPMENT

FOR OFFICIAL USE ONLY

I.D. NO.

PERMIT NO.
DATE

1a. NAME OF OWNER: <u>Olin Corporation</u>		1b. NAME OF OPERATOR: <u>Same</u>	
2a. TELEPHONE NUMBER OF OWNER: <u>618/985-3721</u>		2b. TELEPHONE NUMBER OF OPERATOR:	
3a. STREET ADDRESS OF OWNER: <u>P.O. Drawer G</u>		3b. STREET ADDRESS OF OPERATOR:	
4a. CITY OF OWNER: <u>Marion,</u>		4b. CITY OF OPERATOR:	
5a. STATE OF OWNER: <u>Illinois</u>	5b. ZIP CODE: <u>62959</u>	6a. STATE OF OPERATOR:	6b. ZIP CODE:
7. NAME OF CORPORATE DIVISION OR PLANT (IF DIFFERENT FROM OWNER):			
8. TELEPHONE NUMBER OF DIV. OR PLANT:	9. LOCATED WITHIN CITY LIMITS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	10. STREET ADDRESS OF EMISSION SOURCE:	
11. CITY:	11a. TOWNSHIP:	12. COUNTY:	13. ZIP CODE:

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A PERMIT TO CONSTRUCT OR MODIFY THE EQUIPMENT DESCRIBED HEREIN AND CERTIFIES THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT, AND FURTHER CERTIFIES THAT ALL PREVIOUSLY SUBMITTED INFORMATION REFERENCED IN THIS APPLICATION REMAINS TRUE, CORRECT AND CURRENT.

OWNER (if individual)

OWNER (if corporation or partnership)

Signature

Date

--	--	--	--	--	--	--	--	--	--

Your Identification Number
(Optional)

Exact corporate or partnership name

Date

By

Signature

Title

OPERATOR (if individual)

OPERATOR (if corporation or partnership)

Signature

Date

By

Exact corporate or partnership name

Date

Signature

Title

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PERMIT APPLICATION NO. C

GENERAL INFORMATION

NOTE: APPLICANT MUST SUBMIT TWO COPIES (THREE IF LOCATED IN COOK COUNTY) OF EACH OF THE FOLLOWING:

1. DATA AND INFORMATION FOR EXISTING AIR POLLUTION CONTROL EQUIPMENT (SEPARATE APPLICATION FORMS FOR EACH ITEM OF CONTROL EQUIPMENT NOT COVERED BY AN ATTACHED ADDENDUM).
2. DIMENSIONED DRAWINGS, PLAN, ELEVATION (SECTIONED WHERE NECESSARY AND WHERE APPLICABLE) PLOT PLAN AND MAP SHOWING DISTANCES TO NEAREST BOUNDARY OF THE PROPERTY ON WHICH THE CONTROL EQUIPMENT IS LOCATED, AND THE DISTANCES TO NEAREST RESIDENCES, LODGINGS, NURSING HOMES, HOSPITALS, SCHOOLS, AND COMMERCIAL AND MANUFACTURING ESTABLISHMENTS.
3. FLOW DIAGRAM AS SPECIFIED IN THE INSTRUCTION SHEET.

	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY
14. TYPE OF CONTROL EQUIPMENT: (e.g., MULTICLONE, BAGHOUSE)	a. Wet Venturi	b. Cyclone	c.
15. MANUFACTURER:	a. Slick Corp.	b. Slick Corp.	c.
16. MODEL:	a. 4100	b. 4100	c.
17. SERIAL NUMBER:	a. 72-S-567	b. →	c.
18. COST OF CONTROL EQUIPMENT: (NOT INCLUDING INSTALLATION)	a. \$ 14,000	b. → (Total)	c. \$
19. INLET GAS RATE (CFM AT INLET TEMPERATURE & PRESSURE):	a. CFM	b. CFM	c.
20. INLET GAS RATE (AT STANDARD CONDITIONS):	a. 3570 SCFM	b. SCFM	c.
21. INLET TEMPERATURE (AT POINT OF INLET GAS RATE MEASUREMENT):	a. 270 °F	b. °F	c.
22. EXHAUST GAS RATE (CFM AT EXHAUST TEMPERATURE & PRESSURE):	a. 3900 CFM	b. CFM	c.
23. EXHAUST TEMPERATURE (AT POINT OF EXHAUST GAS RATE MEASUREMENT):	a. °F	b. 120 °F	c.
24. DUCT VELOCITY (AT POINT OF INLET GAS RATE MEASUREMENT):	a. FPS	b. FPS	c.
25. INLET GRAIN LOADING (AT POINT OF INLET GAS RATE MEASUREMENT):	a. 3.8 GRS/SCF	b. GRS/SCF	c.
26. GEOMETRIC MEAN DIAMETER OF PARTICULATE MATTER:	a. 0.45 MICRON	b. MICRON	c.
27. STANDARD GEOMETRIC DEVIATION OF DIS- TRIBUTION OF PARTICLE SIZE BY WEIGHT:	a. 4.2	b.	c.
28. INLET CONCENTRATION BY VOLUME % OF GASEOUS CONTAMINANTS IN THE TOTAL GAS STREAM. (NEED NOT SUBMIT THIS INFORMATION IF FORM APC-63 IS SUBMITTED):	a.	b.	c.
29. PRESSURE DROP:	a. 31 INCHES OF WATER	b. 6 INCHES OF WATER	c.
30. CONTROL EQUIPMENT EFFICIENCY:	a. 99.7 <input type="checkbox"/> VOL % <input checked="" type="checkbox"/> WT %	b. → Total <input type="checkbox"/> VOL % <input type="checkbox"/> WT %	c.
31. EXHAUST GAS DEW POINT:	a. °F	b. °F	c.
32. AVERAGE OPERATION TIME OF CONTROL EQUIPMENT: 6 HRS/DAY 2 DAYS/WK 52 WKS/YR		33. PERCENT OF ANNUAL THRUPT: DEC-FEB 25 % MAR-MAY 25 % JUNE-SEP	

I.D. NO.	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	FOR OFFICIAL USE ONLY PERMIT APPLICATION NO. C	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>
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ADSORBERS AND AFTERBURNERS

ADSORBER	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
34. ADSORBER CAPACITY AT BREAKTHROUGH OF CONTAMINANTS:	a. LB/LB	b. LB/LB	c. LB/LB
35. TYPE ADSORBER:	<input type="checkbox"/> CARBON <input type="checkbox"/> MOLECULAR SIEVE <input type="checkbox"/> SILICA GEL <input type="checkbox"/> ALUMINA <input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> CARBON <input type="checkbox"/> MOLECULAR SIEVE <input type="checkbox"/> SILICA GEL <input type="checkbox"/> ALUMINA <input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> CARBON <input type="checkbox"/> MOLECULAR SIEVE <input type="checkbox"/> SILICA <input type="checkbox"/> ALUMINA <input type="checkbox"/> OTHER (SPECIFY) _____
36. WEIGHT OF ADSORBER MATERIAL:	a. LB	b. LB	c. LB
37. METHOD OF REGENERATION:	a.	b.	c.
38. TIME BETWEEN REGENERATIONS:	a. HRS	b. HRS	c. HRS
39. TIME BETWEEN REPLACEMENTS:	a. HRS	b. HRS	c. HRS
40. ADSORBER GEOMETRY:	a. DIA _____ IN. b. LENGTH _____ FT.	c. DIA _____ IN. d. LENGTH _____ FT.	e. DIA _____ IN. f. LENGTH _____ FT.
41. ADSORBER MATERIAL AVERAGE PARTICULATE SIZE:	a. IN	b. IN	c. IN
42. DISPOSITION OF VAPORS DURING REGENERATION:	a.	b.	c.
43. FUEL (IF DUAL-FIRED BURNER CHECK BOTH FUELS):	<input type="checkbox"/> GAS AVG % OIL ASH _____ <input type="checkbox"/> OIL AVG % OIL SULFUR _____	<input type="checkbox"/> GAS AVG % OIL ASH _____ <input type="checkbox"/> OIL AVG % OIL SULFUR _____	<input type="checkbox"/> GAS AVG % OIL ASH _____ <input type="checkbox"/> OIL AVG % OIL SULFUR _____
44. MAXIMUM RATING:	a. THOUSAND BTU/HR	b. THOUSAND BTU/HR	c. THOUSAND BTU/HR
45. % MODULATION OF BURNER:	a. %	b. %	c. %
46. TYPE OF GAS MONITOR: (e.g., TEMPERATURE, RATE, PRESSURE)	a.	b.	c.
47. IS BURNER TEMPERATURE CONTROLLED:	a. <input type="checkbox"/> YES <input type="checkbox"/> NO	b. <input type="checkbox"/> YES <input type="checkbox"/> NO	c. <input type="checkbox"/> YES <input type="checkbox"/> NO
48. OPERATING TEMPERATURE OF CHAMBER:	a. OF	b. OF	c. OF
49. % OF THEORETICAL AIR FOR COMPLETE COMBUSTION INTRODUCED AS PRIMARY AIR THROUGH BURNER:	a. VOL. %	b. VOL. %	c. VOL. %
50. NAME OF CATALYST USED:	a.	b.	c.
51. CATALYST AREA:	a. FT²	b. FT²	c. FT²
52. THFCAT DIAMETER:	a. FT	b. FT	c. FT
53. COMBUSTION CHAMBER DIAMETER:	a. FT	b. FT	c. FT
54. COMBUSTION CHAMBER LENGTH:	a. FT	b. FT	c. FT
55. RETENTION TIME AT OPERATING TEMP:	a. SEC	b. SEC	c. SEC

N/A

BAGHOUSES AND CYCLONES

BAGHOUSE	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
56. METHOD OF PRIOR COOLING:	<input type="checkbox"/> LIQUID SPRAY <input type="checkbox"/> EXCESS AIR VOL _____ CFM <input type="checkbox"/> EXTENDED DUCTWORK 1. LENGTH _____ FT 2. DIAMETER _____ IN 3. TYPE OF DUCT MATERIAL _____ 4. THICKNESS OF DUCT MATERIAL _____ IN 5. PAINT COLOR _____ 6. GAS VELOCITY _____ FPS <input type="checkbox"/> OTHER (SPECIFY) _____ a. _____	<input type="checkbox"/> LIQUID SPRAY <input type="checkbox"/> EXCESS AIR VOL _____ CFM <input type="checkbox"/> EXTENDED DUCTWORK 1. LENGTH _____ FT 2. DIAMETER _____ IN 3. TYPE OF DUCT MATERIAL _____ 4. THICKNESS OF DUCT MATERIAL _____ IN 5. PAINT COLOR _____ 6. GAS VELOCITY _____ FPS <input type="checkbox"/> OTHER (SPECIFY) _____ b. _____	<input type="checkbox"/> LIQUID SPRAY <input type="checkbox"/> EXCESS AIR VOL _____ CFM <input type="checkbox"/> EXTENDED DUCTWORK 1. LENGTH _____ FT 2. DIAMETER _____ IN 3. TYPE OF DUCT MATERIAL _____ 4. THICKNESS OF DUCT MATERIAL _____ IN 5. PAINT COLOR _____ 6. GAS VELOCITY _____ FPS <input type="checkbox"/> OTHER (SPECIFY) _____ c. _____
57. CLEANING METHOD:	<input type="checkbox"/> SHAKER <input type="checkbox"/> REVERSE AIR <input type="checkbox"/> OTHER (SPECIFY) _____ a. _____	<input type="checkbox"/> SHAKER <input type="checkbox"/> REVERSE AIR <input type="checkbox"/> OTHER (SPECIFY) _____ b. _____	<input type="checkbox"/> SHAKER <input type="checkbox"/> REVERSE AIR <input type="checkbox"/> OTHER (SPECIFY) _____ c. _____
58. TYPE OF CLOTH MATERIAL:	a. _____	b. _____	c. _____
59. FILTER RATIO:	a. _____ CFM/FT ²	b. _____ CFM/FT ²	c. _____ CFM/FT ²
CYCLONE	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
60. TYPE OF CLONE:	<input type="checkbox"/> SIMPLE <input type="checkbox"/> MULTICLONE a. _____	<input type="checkbox"/> SIMPLE <input type="checkbox"/> MULTICLONE b. _____	<input type="checkbox"/> SIMPLE <input type="checkbox"/> MULTICLONE c. _____
61. FOR MULTIPLE UNITS GIVE NUMBER OF CLONES:	a. _____	b. _____	c. _____
62. CONE HEIGHT:	a. _____ IN	b. _____ IN	c. _____ IN
63. INLET WIDTH:	a. _____ IN	b. _____ IN	c. _____ IN
64. BODY HEIGHT:	a. _____ IN	b. _____ IN	c. _____ IN
65. BODY DIAMETER:	a. _____ IN	b. _____ IN	c. _____ IN
66. OUTLET DIAMETER:	a. _____ IN	b. _____ IN	c. _____ IN
67. INLET VELOCITY:	a. _____ FPS	b. _____ FPS	c. _____ FPS
68. EXIT VELOCITY FROM CLONE:	a. _____ FPS	b. _____ FPS	c. _____ FPS
69. CJT SIZE:	a. _____ MICRONS	b. _____ MICRONS	c. _____ MICRONS

N/A

I.D. NO. 	FOR OFFICIAL USE ONLY	PERMIT APPLICATION NO. C
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WET COLLECTOR GENERAL INFORMATION

	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
70. TYPE OF WET COLLECTOR:	<input type="checkbox"/> CYCLONE <input type="checkbox"/> ORIFICE <input type="checkbox"/> SPRAY <input type="checkbox"/> MECHANICAL a. <input checked="" type="checkbox"/> OTHER (SPECIFY) <u>Venturi</u>	<input checked="" type="checkbox"/> CYCLONE <input type="checkbox"/> ORIFICE <input type="checkbox"/> SPRAY <input type="checkbox"/> MECHANICAL b. <input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> CYCLONE <input type="checkbox"/> ORIFICE <input type="checkbox"/> SPRAY <input type="checkbox"/> MECHANICAL c. <input type="checkbox"/> OTHER (SPECIFY) _____
71. INLET SCRUBBANT COMPOSITION AND WT. % EACH:	COMPOSITION WT. % a. <u>H₂O</u> <u>100</u> b. _____ c. _____	COMPOSITION WT. % d. _____ e. _____ f. _____	COMPOSITION WT. % g. _____ h. _____ i. _____
72. PH VALUE OF INLET SCRUBBANT:	a. <u>4.27</u>	b. _____	c. _____
73. OUTLET SCRUBBANT COMPOSITION AND WT. % EACH:	COMPOSITION WT. % a. <u>MgO</u> } <u>NaO</u> } <u>2.74</u> c. <u>H₂O</u> <u>97.26</u>	COMPOSITION WT. % d. _____ e. _____ f. _____	COMPOSITION WT. % g. _____ h. _____ i. _____
74. SCRUBBANT FLOW:	a. <u>2100</u> GPH	b. _____ GPH	c. _____ GPH
75. SCRUBBANT MAKEUP RATE:	a. <u>2100</u> GPH	b. _____ GPH	c. _____ GPH
76. SCRUBBANT MAKEUP COMPOSITION AND WT. % SOLUTE:	a. <u>N/A</u> WT. %	b. _____ WT. %	c. _____ WT. %
77. VAPOR PRESSURE OF LIQUID CONTAMINANT AT OPERATING TEMPERATURE:	a. <u>N/A</u> PSIA	b. _____ PSIA	c. _____ PSIA
78. PRESSURE DROP	a. <u>37</u> INCHES OF WATER	b. <u>6</u> INCHES OF WATER	c. _____ INCHES OF WATER
79. TYPE OF MIST ELIMINATOR:	<input type="checkbox"/> SIMPLE BAFFLES <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> NONE	<input type="checkbox"/> SIMPLE BAFFLES <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> NONE	<input type="checkbox"/> SIMPLE BAFFLES <input type="checkbox"/> OTHER <input type="checkbox"/> NONE
SCRUBBER	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
80. NOZZLE PRESSURE:	a. _____ PSIA	b. _____ PSIA	c. _____ PSIA
81. CONTACT AREA:	a. _____ FT ²	b. _____ FT ²	c. _____ FT ²
82. TYPE OF PACKING:	a. _____	b. _____	c. _____
83. LENGTH OF PACKED BED:	a. _____ IN	b. _____ IN	c. _____ IN
84. SCRUBBER CROSS-SECTIONAL AREA:	a. _____ FT ²	b. _____ FT ²	c. _____ FT ²
VENTURI SCRUBBER	PRIMARY CONTROL EQUIPMENT	SECONDARY CONTROL EQUIPMENT	TERTIARY CONTROL EQUIPMENT
85. THROAT DIAMETER:	a. <u>2" x 20"</u> <input checked="" type="checkbox"/>	b. _____ FT	c. _____ FT
86. GAS VELOCITY AT THROAT:	a. <u>295</u> FPS	b. _____ FPS	c. _____ FPS
87. CORRELATION COEFFICIENT:	a. _____	b. _____	c. _____

I.D. NO. 		FOR OFFICIAL USE ONLY		C 	
EXHAUST					
89. EXHAUST GAS FROM CONTROL EQUIPMENT IS VENTED TO: <input type="checkbox"/> INSIDE BUILDING <input checked="" type="checkbox"/> ATMOSPHERE <input type="checkbox"/> OTHER (SPECIFY): _____			90. YOUR DESIGNATION OF STACK OR VENT: <div style="text-align: center; font-size: 1.2em;">Destructor</div>		
91. HOW EMISSIONS ARE EXHAUSTED: <input checked="" type="checkbox"/> STACK <input type="checkbox"/> VENT		92. GAS EXIT VELOCITY: <div style="text-align: center; font-size: 1.2em;">51</div> <div style="text-align: right; font-size: 0.8em;">FPS</div>		93. GAS EXIT TEMPERATURE: <div style="text-align: center; font-size: 1.2em;">120</div> <div style="text-align: right; font-size: 0.8em;">OF</div>	
94. DRAFT CONTROLS: <input checked="" type="checkbox"/> MANUAL <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> BAROMETRIC <input type="checkbox"/> OTHER (SPECIFY) _____					
95. HEIGHT OF STACK OR VENT ABOVE GRADE: <div style="text-align: center; font-size: 1.2em;">23-1/2 ft.</div>		97. HEIGHT OF STACK OR VENT ABOVE ROOF: <div style="text-align: center; font-size: 1.2em;">13-1/2</div> <div style="text-align: right; font-size: 0.8em;">FT</div>		98. HEIGHT OF TALLEST BUILDING WITHIN 150 FEET: <div style="text-align: center; font-size: 1.2em;">10</div> <div style="text-align: right; font-size: 0.8em;">FT</div>	
99. STACK OR VENT SERVES: <input checked="" type="checkbox"/> ONLY THIS EQUIPMENT <input type="checkbox"/> OTHER EQUIPMENT				100. AREA OF STACK OR VENT AT EXIT: <div style="text-align: center; font-size: 1.2em;">1.28</div> <div style="text-align: right; font-size: 0.8em;">FT²</div>	
101. IF OTHER EMISSION SOURCES OR AIR POLLUTION CONTROL EQUIPMENT ARE EXHAUSTED THROUGH THE STACK OR VENT SERVING THE EQUIPMENT COVERED BY THIS APPLICATION, THE APPLICANT SHALL DEFINE THE NATURE AND QUANTITY OF THE EMISSIONS FROM SUCH OTHER EQUIPMENT AND ATTACH SUCH INFORMATION TO THIS APPLICATION AS EXHIBIT G. TOTAL NUMBER OF PAGES IN EXHIBIT G: _____					
102. THE APPLICANT SHALL SUBMIT AN ESTIMATE OF THE MAXIMUM ONE-HOUR AMOUNTS OF PARTICULATE MATTER, SULFUR DIOXIDE, CARBON MONOXIDE, OXIDES OF NITROGEN, AND HYDROCARBONS (AS METHANE) EMITTED FROM ALL SOURCES LOCATED ON THE PLANT OR PREMISES, INCLUDING THE EMISSIONS ESTIMATED FROM THE EQUIPMENT COVERED BY THIS APPLICATION, AND THE AREA (IN ACRES) OF THE PLANT OR PREMISES OF THE APPLICANT. 100 acres					
MATERIAL	ONE-HOUR MAX. AMOUNTS	MATERIAL	ONE-HOUR MAX. AMOUNTS	MATERIAL	ONE-HOUR MAX. AMOUNTS
PARTICULATE MATTER	1.24 LB	SULFUR DIOXIDE	nil LB	NITROGEN OXIDES AS NO ₂	nil LB
HYDROCARBONS AS CH ₄	nil LB	CARBON MONOXIDE	1.6 LB		

EXHAUST GAS ANALYSIS					
CONTAMINANT	CONCENTRATION	EMISSION RATE	METHOD OF MEASURE AND ANALYSIS	METHOD OF MONITORING	
103. CARBON DIOXIDE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
104. CARBON MONOXIDE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
105. CHLORINE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
106. HYDROCARBONS AS CH ₄	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
107. HYDROGEN CHLORIDE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
108. HYDROGEN SULFIDE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
109. NITROGEN	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
110. NITROGEN OXIDES AS NO ₂	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
111. SULFUR DIOXIDE	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
112. OTHER (SPECIFY)	a. PPM	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	
113. PARTICULATE MATTER	a. GRAIN/SCF	b. <input type="checkbox"/> LB/10 ⁶ BTU <input type="checkbox"/> LB/HR	c.	d.	

4. PARTICULATE MATTER COMPOSITION EXPRESSED AS PERCENT BY WEIGHT OF EACH COMPONENT (COMMON NAME SHALL BE GIVEN IF CHEMICAL NAME IS UNKNOWN):



STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF AIR POLLUTION CONTROL
2200 CHURCHILL ROAD
SPRINGFIELD, ILLINOIS 62706

RICHARD B. OLIVIE, GOVERNOR
WILLIAM L. BLASER, DIRECTOR

ADDENDUM W
WASTEWATER TREATMENT
FROM
WET COLLECTORS

FOR OFFICIAL USE ONLY

I.D. NO.

PERMIT NO.

DATE

1. NAME OF OWNER: Olin Corporation		7. NAME OF CORPORATE DIVISION OR PLANT (IF DIFFERENT FROM OWNER): Same	
2. TELEPHONE NUMBER: 618/985-3721		8. TELEPHONE NUMBER:	
3. STREET ADDRESS OF OWNER: P.O. Drawer G		9. STREET ADDRESS OF EMISSION SOURCE:	
4. CITY: Marion,		10. CITY:	11. LOCATED WITHIN CITY LIMITS: <input type="checkbox"/> YES <input type="checkbox"/> NO
5. STATE: Ill.	6. ZIP CODE: 62959	12. COUNTY:	13. ZIP CODE:

NOTE: COMPLETE ITEMS 14 AND 15 IF WATER IS DISCHARGED TO A SEWER.

- | | |
|---|--|
| 14. NAME AND TITLE OF PERSON CERTIFYING ADEQUATE CAPACITY OF TRANSPORT AND TREATMENT: | 15. SIGNATURE AND DATE (OWNER OR AUTHORIZED AGENT OF SEWER SYSTEM AND IF APPLICABLE, TREATMENT WORKS): |
|---|--|

PERMIT TO (X) *CONSTRUCT (X) *AND OPERATE * (X) - AS APPLICABLE

16. WASTEWATER FLOW RATE THROUGH AIR POLLUTION CONTROL DEVICE:

- | | | |
|--------------|--------|---------|
| a. MAX. FLOW | 16,800 | GAL/DAY |
| b. AVG. FLOW | 4,200 | GAL/DAY |
| c. MIN. FLOW | 0 | GAL/DAY |

17. CONTAMINANTS PRESENT IN WASTEWATER	FEED WATER TO DEVICE (mg/l)	DISCHARGE FROM DEVICE (mg/l)	EFFLUENT FROM TREATMENT PROCESS (mg/l)
SUSPENDED SOLIDS	nil	27,400	
TOTAL DISSOLVED SOLIDS			
pH	4.27	10.60	
OTHERS ***			

*** LIST AND ANALYZE ALL OTHER CONTAMINANTS IN WASTEWATER FOR WHICH STANDARDS ARE SET BY "CHAPTER 3, WATER POLLUTION CONTROL REGULATION OF ILLINOIS." (ATTACH ADDITIONAL SHEETS IF NECESSARY.)

18. TREATMENT PROCESS (ATTACH A SCHEMATIC FLOW DIAGRAM ON 8 1/2" x 11" SHEET(S)) SHOWING THE WASTEWATER TREATMENT PROCESS INCLUDING LOADING RATES FOR EACH COMPONENT OF WASTEWATER TREATMENT SYSTEM.

N/A

19. NAME OF TREATMENT PLANT OR BODY OF WATER TO WHICH THE WASTE IS ULTIMATELY DISCHARGED.

Captive Former Strip Mine Pit on Olin Property

THIS ADDENDUM WILL BE REVIEWED BY THE DIVISION OF WATER POLLUTION CONTROL AND THE APPLICANT WILL BE NOTIFIED WHETHER OR NOT ADDITIONAL DATA OR DOCUMENTATION NEED BE SUBMITTED TO CONSTITUTE A COMPLETE APPLICATION FOR PERMIT AS REQUIRED BY PART IX OF "WATER POLLUTION REGULATIONS OF ILLINOIS."

Note: Wash water is cycled from an acid captive strip mine pond through a Venturi Scrubber and returned to the pond. This action tends to neutralize the acid pond.

ADDENDUM

The process covered by the included EPA Forms numbers APC-63, APC-61, and APC-104 was developed under a permit to open burn in an experimental incinerator granted March 3, 1972 by the Illinois EPA. (Illinois EPA reference OB 02 72 041, FIPS #199055).

Although the permit refers to an experimental incinerator, this Construction Application seeks permission for a "Process" rather than an "Incinerator" because of the nature of the equipment and of the material destructed. The materials oxidized are not the normal carbonaceous materials burned in an incinerator, but are chemicals which, when reacted with oxygen, yield very little carbon monoxide and carbon dioxide. Instead, large quantities of magnesium oxide and sodium oxide are formed. The process also differs from incineration in that the flame temperature of the materials is of such great magnitude as to necessitate very high flow of cooling air through the destructor. This flow of cooling air is also required to give sufficient volume under negative pressure to prevent smoke from puffing out the charging and draft openings during the very rapid combustion of the pyrotechnic material. Combustion of this type of material presents hazards which are minimized by use of large air flows. The equipment is operated with 2700 to 2900% excess air.

This equipment is considered as "existing" rather than "new" since actual construction was under contract in March of 1972 with the full knowledge and permission of the Illinois EPA.

Drawings, plot plans, area maps, and flow sheets for this process are not included here, as all pertinent material has previously been submitted under EPA References I 71 296, I.D. #006300 and OB 02 72 041, FIPS #199055.

04460EJ0034

TEST REPORT
OLIN DESTRUCTOR

Emission Test Results

The attached data are the results of the emission tests performed on 1/25/72 and 1/29/72 on the Olin Scrap Destructor located at Energy. This unit utilizes a high energy Venturi scrubber and a cyclone separator. Test #2 in the summary table shows that the Venturi scrubber is removing 99.74% by weight of the emissions leaving the destructor when illuminants are charged. The resultant controlled stack emissions of 1.24 lb/hr are less than the Illinois emission limits of 1.56 lb/hr for existing processes at a process weight rate of 473 lb/hr. This controlled emission release is exceptionally low when one considers that most processes do not release an amount of aerosols that equals the weight of the process material charged into the operation.

Test #3 shows that when ammonium nitrate scrap is destroyed, the controlled emissions are 0.51 lb/hr which is well below the state limit of 1.40 lb/hr when the process weight is 400 lb/hr.

No particulates were measured when the charcoal bed was heating up because this start-up requires only 10-15 minutes and no visible emissions were observed during this time when the scrubber was operating.

All emissions gave negligible Ringelmann readings. Moisture condensation plumes were observed during the illuminant (Test #2) and the ammonium nitrate (Test #3) runs with the more brilliant plume occurring during Test #2.

Additional calculations, notes and data related to these tests are recorded in Dr. H.E. Hesketh's Notebook No. 71.

Emission Test Procedure

Copies of the test data sheets, calculation sheets and equipment schematic are attached. Note that the test procedure was essentially as outlined in the memo of 11/21/72 which was transmitted to the Illinois EPA on 11/22/72. Actual test procedures used which deviated from the proposed procedures are:

Particulate Matter:

A 5-minute sample was taken from the centroids of each of the 12 equal areas giving the total sample time per run of 60 minutes. This minimum time interval is suggested by both the Federal Register 24890, Method 5 (1971) and the new ASTM Method D 2928-71.

Gases:

The barium-thorin procedure as outlined in the Federal Register 24890, Method 6 (1971) and as approved by the Illinois EPA (John C. Reed letter to Olin dated 1/3/73) was used for the sulfur dioxide determination. Note that this method showed 0 ppm SO₂ (Test #2). (The Faristor measurements observed during a previous illuminant destruction test showed about 30 ppm SO₂.) The approved SO₂ test procedure as used is shown in the equipment schematic.

Carbon monoxide was measured by both gas chromatographic and colorimetric tube length of stain procedures. The accurate gas chromatography results are reported, but it is interesting to note that the length of stain results were 1 to 2 times higher. Possibly this was due to interference of other substances.

0 4 1 8 0 0 0 0 3 6

IL-15-14

EXHIBIT "A"

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF AIR POLLUTION CONTROL
2200 CHURCHILL ROAD
SPRINGFIELD, ILLINOIS 62706

RICHARD B. OGILVIE, GOVERNOR
WILLIAM E. BLASER, DIRECTOR

OPERATING PERMIT APPLICATION
FOR EXISTING INCINERATOR*

I.D. NO.

FOR OFFICIAL USE ONLY

PERMIT NO.

DATE

0

1

1a. NAME OF OWNER:

Olin Corporation

2a. TELEPHONE NUMBER OF OWNER:

618/985-3721

3a. STREET ADDRESS OF OWNER:

P.O. Drawer G

4a. CITY OF OWNER:

Marion

5a. STATE OF OWNER:

Illinois

6a. ZIP CODE:

62959

7. NAME OF CORPORATE DIVISION OR PLANT (IF DIFFERENT FROM OWNER):

8. TELEPHONE NO. OF DIV. OR PLANT

9. LOCATED WITHIN CITY LIMITS:

YES NO X

1b. NAME OF OPERATOR:

2b. TELEPHONE NUMBER OF OPERATOR:

3b. STREET ADDRESS OF OPERATOR:

4b. CITY OF OPERATOR:

5b. STATE OF OPERATOR:

6b. ZIP CODE:

11. CITY:

11a. TOWNSHIP:

12. COUNTY:

13. ZIP CODE:

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A PERMIT TO OPERATE THE EQUIPMENT DESCRIBED HEREIN AND CERTIFIES THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT, AND FURTHER CERTIFIES THAT ALL PREVIOUSLY SUBMITTED INFORMATION REFERENCED IN THIS APPLICATION REMAINS TRUE, CORRECT AND CURRENT.

OWNER (IF INDIVIDUAL)

SIGNATURE

DATE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

YOUR IDENTIFICATION NUMBER
(OPTIONAL)

OWNER (IF CORPORATION OR PARTNERSHIP)

Olin Corporation

1-21-74

EXACT CORPORATE OR PARTNERSHIP NAME

DATE

BY

SIGNATURE

- Corp. Vice President
& General Manager
TITLE
Winchester-Western
Division

OPERATOR MUST SIGN IF DIFFERENT FROM OWNER

OPERATOR (IF INDIVIDUAL)

SIGNATURE

DATE

OPERATOR (IF CORPORATION OR PARTNERSHIP)

EXACT CORPORATE OR PARTNERSHIP NAME

DATE

BY

SIGNATURE

TITLE

IF AN OWNER OR OPERATOR IS A CORPORATION, IT MUST HAVE ON FILE WITH THE AGENCY A CERTIFIED COPY OF A RESOLUTION OF ITS BOARD OF DIRECTORS AUTHORIZING THE INDIVIDUALS SIGNING THE APPLICATION TO EXECUTE THIS OPERATING PERMIT APPLICATION AND TO CAUSE OR ALLOW THE CONSTRUCTION, MODIFICATION AND OPERATION OF THE EQUIPMENT TO BE COVERED ON THE PERMIT.

*THIS APPLICATION FORM SHALL BE USED FOR ONLY INCINERATOR LESS THAN TWO THOUSAND (2000) LB/HR CAPACITY. FOR OTHER INCINERATORS FORM APC-60 PLUS SUITABLE ADDITIONAL FORMS SHALL BE USED.

Exhibit A - 1 page

Form APC-63 plus attachments - 27 pages

FOR OFFICIAL USE ONLY		PERMIT NO. 1
14. HAS THE EQUIPMENT DESCRIBED IN THIS INFORMATION FORM INSTALLED AT THE PLANT OR PREMISES ON OR BEFORE APRIL 14, 1972?		<input type="checkbox"/> YES <input type="checkbox"/> NO
IF NO, STATE WHETHER THE APPLICANT HAD, ON OR BEFORE APRIL 14, 1972, ENTERED INTO A BINDING AGREEMENT OR CONTRACTUAL OBLIGATION TO GET STATE AND COMPLETE, WITHIN A REASONABLE TIME, A CONTINUOUS PROGRAM OF CONSTRUCTION OR MODIFICATION OF THE EQUIPMENT DESCRIBED IN THIS INFORMATIONAL FORM:		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
15. APPLICANT MUST SUBMIT: A PLOT PLAN AND MAP SHOWING DISTANCES TO NEAREST BOUNDARY OF THE PROPERTY ON WHICH THE EMISSION SOURCE IS LOCATED AND THE DISTANCES TO NEAREST RESIDENCES, LODGINGS, NURSING HOMES, HOSPITALS, SCHOOLS, COMMERCIAL, AND MANUFACTURING ESTABLISHMENTS UP TO THREE-HUNDRED (300) FEET.		
16. STATE INSTALLATION DATE OF THE INCINERATOR. HAS THE ENVIRONMENTAL PROTECTION AGENCY OR THE TECHNICAL SECRETARY OF THE POWER AIR POLLUTION CONTROL BOARD ISSUED AN INSTALLATION PERMIT FOR THIS INCINERATOR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", CITE THE INSTALLATION PERMIT NUMBER _____.		
a. IS THE DATA AND INFORMATION PREVIOUSLY SUBMITTED TRUE, CORRECT, AND CURRENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
b. HAVE ALL CONDITIONS OF THE PERMIT BEEN COMPLIED WITH? <input type="checkbox"/> YES <input type="checkbox"/> NO		
c. IF ANSWER TO a OR b IS "NO" EXPLAIN IN DETAIL AND MARK EXPLANATION AS EXHIBIT A. TOTAL NUMBER OF PAGES IN EXHIBIT A <u>1</u>		
IF THE ANSWERS TO ALL QUESTIONS IN ITEM 16 ARE "YES" AND THE APPLICANT HAS CITED THE APPROPRIATE INSTALLATION OR CONSTRUCTION PERMIT NUMBER, ITEMS 17 THROUGH 26 NEED NOT BE COMPLETED.		
17. DESCRIPTION OF SOURCE OF WASTE:		FOR AGENCY USE ONLY DO NOT COMPLETE THIS SECTION
See attachments for balance of information.		
18. MAKE OF INCINERATOR:		MANUFACTURER CODE
19. INCINERATOR MODEL NO:	20. <input type="checkbox"/> FLUE <input type="checkbox"/> SINGLE CHAMBER <input type="checkbox"/> MULTIPLE CHAMBER	MODEL CODE
21. MAXIMUM AMOUNT OF WASTE TO BE INCINERATED: _____ LB/HR		CAPACITY CODE
22. ESTIMATED DAILY AMOUNT OF WASTE TO BE INCINERATED: _____ LB		PARTICULATE EMISSION FACTOR CODE
23. HEIGHT OF STACK ABOVE GRADE: _____ FT.		CO EMISSION FACTOR CODE
HEIGHT OF NEAREST OBSTRUCTION WITHIN 150 FT.: _____ FT.		
25. <input type="checkbox"/> YES <input type="checkbox"/> NO PRIMARY BURNER USED: MAX. RATING _____ BTU/HR		PRIMARY BURNER CODE
26. <input type="checkbox"/> YES <input type="checkbox"/> NO SECONDARY BURNER USED: MAX. RATING _____ BTU/HR		SECONDARY BURNER CODE
27. DESCRIPTION OF TYPICAL WASTE (COMPLETE ITEMS 27a THROUGH 27k AND 38 AS APPLICABLE):		
27a. PAPER _____ % BY WT	27b. DRY WOOD: _____ % BY WT	27c. LEATHER, LINOLEUM: _____ % BY WT
27d. RUBBER AND PLASTICS: _____ % BY WT	27e. OILS AND PAINTS: _____ % BY WT	27f. STREET AND FLOOR SWEEPINGS: _____ % BY WT
27g. FATS AND MEAT DRESSING: _____ % BY WT	27h. GLASS AND CERAMICS: _____ % BY WT	27i. METALS: _____ % BY WT
27j. LEAVES, GRASS, BRANCHES, VEGETABLES & FRUITS: _____ % BY WT	27k. OTHER (SPECIFY): _____ % BY WT	
28. AVERAGE OPERATION TIME OF INCINERATOR: _____ HRS/DAY _____ DAYS/WEEK _____ WKS/YEAR		
29. PERCENT OF ANNUAL THROUGHPUT: DEC-FEB _____ % MAR-MAY _____ % JUNE-AUG _____ % SEPT-NOV _____ %		
GAS SCRUBBERS		
30. MAKE AND MODEL:	31. FLOW RATE: _____ GPH	32. CAPACITY: _____ SCFM
33. PRESSURE DROP _____ IN-H ₂ O	34. PRESSURE AT NOZZLES: _____ PSI	35. COMPOSITION OF SOLUTION:
36. EFFICIENCY (ATTACH SUPPORTING DATA): _____ %	37. DISPOSITION OF WASTE:	
38. NOTE: FOR INDUSTRIAL WASTES, COMPLETE COMPONENT AND/OR CHEMICAL DESCRIPTION INCLUDING SULFUR, CHLORIDE, ASH, AND MOISTURE CONTENT MUST BE GIVEN IN AN ADDENDUM ATTACHED TO THIS APPLICATION.		